



STATE OF WASHINGTON  
WASHINGTON STATE BOARD OF HEALTH  
1102 SE Quince Street • PO Box 47990  
Olympia, Washington 98504-7990

# **Summary of Planned Work**

## **Access to Critical Health Services, Phase II (2001-03)**

**Board Sponsors:**  
**Thomas Locke, M.D., M.P.H.**  
**Ed Gray, M.D.**

Lead Staff: Don Sloma, (360) 236-4102

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***For more information contact Board staff at:***

Telephone: (360) 236-4100

Fax: (360) 236-4088

Email: [wsboh@doh.wa.gov](mailto:wsboh@doh.wa.gov)

Web: <http://www.doh.wa.gov/sboh/>

## Overview

The Board has a longstanding interest in ensuring that all Washington residents have access to health care services that are needed to maintain and improve their health. The recently approved Standards for Public Health outlines a role for state and local health jurisdictions in assessing access to critical health services, referring residents to services and mobilizing communities to expand access. In addition, many state and federal health and medical services agencies (including Medicare, Medicaid, the state's Basic Health Plan and others) have missions that involve expanding access to medical services.

However, the cost and proliferation of health and medical services have led many to question which services are most critical for the health of all residents. In September of 2000, the Board approved a "menu" of critical health services designed to assist state and local health officials in making this determination. While not prescriptive, the Menu is intended to call special attention to those services proven by research to be effective and that enjoy support among a broad range of state and national experts as having a significant impact on community health. The Board has determined to share this list with a wide range of health policy makers in order to promote its consideration in a wide range of health policy setting contexts.

This new work will include collaborating with local health jurisdictions to develop and use localized lists; exploring ways to incorporate the list into the development of an insurance product; and developing a list of performance measures for assessing access.

The Board will also convene forums on access around the state, in conjunction with the Governor's Subcabinet on Health, and/or the Governor's Office of Policy HRSA grant.

The Board will continue to contribute to the Public Health Improvement Partnership, taking the lead on access. This year, the PHIP will focus on implementing the new standards, which call on local health jurisdictions to develop their own local menus of critical health services, assess the availability of those services in their communities, and engage their communities in efforts to address gaps identified during the assessment. The Board will explore ways to assist local health jurisdictions with standards implementation—creating venues for sharing lessons learned, for example, or finding ways to build support for standards implementation at the state level or before local boards of health.

## Promote Menu of Critical Health Services

Task	Timeline
Assemble menu materials and print final report under single cover	November 2001
Revise and update relevant materials on the Web	November 2001
Distribute final report in print and electronically	January 2002
Present final report and menu at meetings and conferences	Ongoing
Continue to discuss the use of the Board's menu by state	Ongoing

purchasing and regulatory agencies as a potential basis for an insurance product, as guide to LHJs for implementing PHIP standards, as a tool for assessing access, and for other purposes.	
Continue to promote use of menu through PHIP meetings	Ongoing

## Encourage Public Engagement in Access Discussion

Task	Timeline
Continue to participate in HRSA grant oversight panel	Ongoing
Continue to participate in Governor's Subcabinet on Health	Ongoing
Convene public forums for discussion of HRSA planning grant findings and recommendations	May to November 2002
Encourage LHJs to present local access issues at Board meetings	Ongoing

## Support Local Access Improvement/Standards Implementation

Tasks	Timeline
Continue to track and provide visibility for local access improvement efforts such as those going on in Spokane, Jefferson, Thurston, Clark and other counties.	Ongoing
Explore possibility of convening conference or other venue where local jurisdictions can share lessons learned and best practices.	TBD
Explore possibility of outside funding to support an ethnographic study, media campaign, or other activities that would increase visibility of implementation or increase awareness of local efforts	TBD